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FORM

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Total Number of Pages in This Submission	Attorney Docket Number	ALPI-18833
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ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Crutsinger & Booth, LLC		
Signature			
Printed name	Peter V. Schroeder		
Date	01/05/2007	Reg. No.	42,132

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Stephanie Dent	Date	01/05/2007

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